

**United States Bankruptcy Court**  
**Northern District of Ohio**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>LifeHealth Science, LLC</b>	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) <b>27-1525709</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): <b>1375 East Ninth Street, Suite 2800</b> <b>Cleveland, OH</b>	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code <b>44114</b>	ZIP Code
County of Residence or of the Principal Place of Business: <b>Cuyahoga</b>	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <b>1375 East Ninth Street, Suite 2800</b> <b>Cleveland, OH</b>	Mailing Address of Joint Debtor (if different from street address):
ZIP Code <b>44114</b>	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

<b>Type of Debtor</b> (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<b>Nature of Business</b> (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		<b>Nature of Debts</b> (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.

<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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<b>Statistical/Administrative Information</b>										THIS SPACE IS FOR COURT USE ONLY											
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																					
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"> <input checked="" type="checkbox"/>             1-49         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             50-99         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             100-199         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             200-999         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             1,000-5,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             5,001-10,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             10,001-25,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             25,001-50,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             50,001-100,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             OVER 100,000         </td> </tr> </table>										<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000		
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Estimated Assets <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$0 to \$50,000         </td> <td style="width: 10%; text-align: center;"> <input checked="" type="checkbox"/>             \$50,001 to \$100,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$100,001 to \$500,000         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$500,001 to \$1 million         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$1,000,001 to \$10 million         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$10,000,001 to \$50 million         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$50,000,001 to \$100 million         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$100,000,001 to \$500 million         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             \$500,000,001 to \$1 billion         </td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/>             More than \$1 billion         </td> </tr> </table>										<input type="checkbox"/> \$0 to \$50,000	<input checked="" type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion		
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<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>LifeHealth Science, LLC</b>	
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>- None -</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>- None -</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>X</b> Signature of Attorney for Debtor(s) _____ (Date) _____	
<b>Exhibit C</b>  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
<b>Exhibit D</b>  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
_____ (Name of landlord that obtained judgment)			
_____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

**Voluntary Petition***(This page must be completed and filed in every case)*Name of Debtor(s):  
**LifeHealth Science, LLC****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.  
 [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  
 [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Debtor

**X**

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

**Signature of Attorney\*****X /s/ Harry W. Greenfield**

Signature of Attorney for Debtor(s)

**Harry W. Greenfield**

Printed Name of Attorney for Debtor(s)

**Buckley King LPA**

Firm Name

**1400 Fifth Third Center  
600 Superior Ave E  
Cleveland, OH 44114**

Address

**216-363-1400**

Telephone Number

**October 2, 2013**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ Kent Adams**

Signature of Authorized Individual

**Kent Adams**

Printed Name of Authorized Individual

**President & CEO**

Title of Authorized Individual

**October 2, 2013**

Date

**Signatures****Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.*

**United States Bankruptcy Court**  
**Northern District of Ohio**

In re LifeHealth Science, LLC

Debtor(s)

Case No.

Chapter

11

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
<b>Cavitch, Familo, Durkin &amp; Frutkin 1300 East Ninth Street Cleveland, OH 44114</b>	<b>Cavitch, Familo, Durkin &amp; Frutkin 1300 East Ninth Street Cleveland, OH 44114</b>	<b>Legal Services</b>		<b>9,877.58</b>
<b>Equity Trust Company 225 Burns Road Elyria, OH 44035</b>	<b>Equity Trust Company 225 Burns Road Elyria, OH 44035</b>	<b>Unsecured loan to the company</b>		<b>104,405.46</b>
<b>Harvey Kaufman 7185 Arbutus Hudson, OH 44236</b>	<b>Harvey Kaufman 7185 Arbutus Hudson, OH 44236</b>	<b>Back pay accrued</b>	<b>Disputed</b>	<b>76,372.61</b>
<b>Hyman, Phelps, McNamara 1300 13th Street, NW, Suite 1200 Washington, DC 20005-5929</b>	<b>Hyman, Phelps, McNamara 1300 13th Street, NW, Suite 1200 Washington, DC 20005-5929</b>	<b>Legal Services</b>		<b>6,400.00</b>
<b>Kent Adams 8870 Darrow Road, Suite F106-239 Twinsburg, OH 44087</b>	<b>Kent Adams 8870 Darrow Road, Suite F106-239 Twinsburg, OH 44087</b>	<b>Back pay accrued</b>		<b>43,846.00</b>
<b>Lifelink Pharmaceuticals, Inc. 1350 Commerce Drive Stow, OH 44224</b>	<b>Lifelink Pharmaceuticals, Inc. 1350 Commerce Drive Stow, OH 44224</b>	<b>Royalties</b>	<b>Disputed</b>	<b>1,717.45</b>
<b>MGLP One Cleveland Center, #2800 1375 E. 9th Street Cleveland, OH 44114</b>	<b>MGLP One Cleveland Center, #2800 1375 E. 9th Street Cleveland, OH 44114</b>	<b>Unsecured loan to the company</b>		<b>279,219.19</b>
<b>Peregrine Research, LLC 3949 Willow Creek Road Morgan, UT 84050</b>	<b>Peregrine Research, LLC 3949 Willow Creek Road Morgan, UT 84050</b>			<b>2,500.00</b>

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the President & CEO of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date October 2, 2013

Signature /s/ Kent Adams  
Kent Adams  
President & CEO

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court  
Northern District of Ohio**

In re LifeHealth Science, LLC

Debtor(s)

Case No.

Chapter

11

**VERIFICATION OF CREDITOR MATRIX**

I, the President & CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: October 2, 2013

/s/ Kent Adams

**Kent Adams/President & CEO**  
Signer>Title

1632 Enterprise Parkway LLC  
2066 Case Parkway  
Twinsburg, OH 44087

1632 Enterprise Parkway, LLC  
2066 Case Parkway  
Twinsburg, OH 44087

Biotheratech, LLC  
8383 Mentor Avenue, Suite 101  
Mentor, OH 44060

Biotheratech, LLC  
8383 Mentor Avenue, Suite 101  
Mentor, OH 44060

Cavitch, Familo, Durkin & Frutkin  
1300 East Ninth Street  
Cleveland, OH 44114

Dominion East Ohio Gas  
P.O. Box 5759  
Cleveland, OH 44101-0759

Equity Trust Company  
225 Burns Road  
Elyria, OH 44035

Great Falls  
c/o Michael Frautten, CFO  
121 Mill Street  
Auburn, ME 04210

Harvey Kaufman  
7185 Arbutus  
Hudson, OH 44236

HBMG, Inc.  
c/o Ed Bocknik  
185 Route 132, Suite 303  
Brewster, NY 10509

Hyman, Phelps, McNamara  
1300 13th Street, NW, Suite 1200  
Washington, DC 20005-5929

Kent Adams  
8870 Darrow Road, Suite F106-239  
Twinsburg, OH 44087

Lifelink Pharmaceuticals, Inc.  
1350 Commerce Drive  
Stow, OH 44224

Lifelink Pharmaceuticals, Inc.  
1350 Commerce Drive  
Stow, OH 44224

MGLP  
One Cleveland Center, #2800  
1375 E. 9th Street  
Cleveland, OH 44114

National Marketing  
1030 Summerfield Suite A  
Roselle, IL 60172

NSI  
413 Reserve Trail  
Chagrin Falls, OH 44022

Ohio Edison  
P.O. Box 3637  
Akron, OH 44309-3637

Peregrine Research, LLC  
3949 Willow Creek Road  
Morgan, UT 84050

Rose Whitcomb  
1724 4th Street  
Cuyahoga Falls, OH 44221

Sophia Nail  
7267 Winchester Drive  
Solon, OH 44139

Sweet Pea Venture  
P.O. Box 440223  
Aurora, CO 80044

Windstream  
P.O. Box 9001908  
Louisville, KY 40290-1908

**United States Bankruptcy Court  
Northern District of Ohio**

In re LifeHealth Science, LLC

Debtor(s)

Case No.  
Chapter

11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for LifeHealth Science, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [Check if applicable]

October 2, 2013

Date

/s/ Harry W. Greenfield

**Harry W. Greenfield**

Signature of Attorney or Litigant  
Counsel for LifeHealth Science, LLC  
**Buckley King LPA**

**1400 Fifth Third Center  
600 Superior Ave E  
Cleveland, OH 44114  
216-363-1400**